10/612,178

Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

03936-POODIA

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OR			OTHER THAN SMALL ENTITY		
TOTAL CLAIMS			35					RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00	
TOTAL CHARGEABLE CLAIMS			3 minus 20=		. 12			X\$ 9=		OR	X\$18=	238	
INDEPENDENT CLAIMS			6 minus 3 =		*3			X42=		OR	X84≈	223	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=		OR	+280=	0.24	
* If	the difference	in column 1 is	ess than zero, enter "0" in c			olumn 2		TOTAL		OR	TOTAL	1390	
CLAIMS AS AMENDED - PART II								L	• · ·	OTHER			
		(Column 1)	(Column 2) (Column				_	SMALL ENTITY O					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVK PAID	BER DUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 36	Minus	<i> 3</i>	6	= /		X\$ 9=		OR	X\$18=	·	
	Independent	* O NTATION OF M	Minus	*** (	CLAIM	<u> -/</u>	4	X42=		OR	X84=		
L				CNOCIN		<u>/</u>	4	+140=		OR	+280=		
	·							TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	· 28	Minus	# 3	36	=		X\$ 9=		OR	X\$18=		
	Independent	* 3 NTATION OF M	Minus	***	CLAIM	=/	$\left\{ \ \right $	X42=		OR	X84=		
L					CONIN	<del></del>	<b>-</b>	+140=		OR	+280=		
							Q.	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)								AUDII. I LL I			ADDII. I EE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	<b>⅃</b> ┃	X42=		OR	X84=		
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, anter "20."										٠	TOTAL	<b></b>	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													

FORM PTO-675 (Rev. 12/02).

\*U.S. Government Printing Office: 2003 -- 498-278/69151

Palent and Trademark Office, U.S. DEPARTMENT OF COMMERCE